United States District Court

for the

Southern Dis	strict of New York
AMERICAN INFERTILITY OF NEW YORK, P.C. d/b/a as Center for Human Reproduction and NORBERT GLEICHER, M.D.)))
Plaintiff(s) v. KINDBODY, INC., KBI SERVICES, INC., and EMPIRE MEDICAL PRACTICE, P.C.) Civil Action No. 25-CV-05221))))

SUMMONS IN A CIVIL ACTION

)

To: (Defendant's name and address)
Kindbody, Inc., 102 Fifth Avenue, New York, NY 10011

KBI Services, Inc., 102 Fifth Avenue, New York, NY 10011

Empire Medical Practice, P.C., 102 Fifth Avenue, New York, NY 10011

A lawsuit has been filed against you.

Defendant(s)

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Turman Legal Solutions PLLC 626 RXR Plaza Uniondale, New York 11556 (516) 266-6101 Attn: Stephen E. Turman, Esq. sturman@turmanlegal.com

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

		CLERK OF COURT		
Date:	6/25/2025	s/ G. Pisarczyk		
		Tammi M. Wollwig Signature of Clerk or Deputy Clerk		
		THE SOUTH AND TH		

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Civil Action No. 25-CV-05221

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

was re	ceived by me on (date)	·				
	☐ I personally served	the summons on the individual	at (place)			
			on (date)			
	☐ I left the summons at the individual's residence or usual place of abode with (name)					
	, a person of suitable age and discretion who resides there					
	on (date)	on (date), and mailed a copy to the individual's last known address; or				
	☐ I served the summons on (name of individual) , who i designated by law to accept service of process on behalf of (name of organization)					
			on (date)	; or		
	☐ I returned the sumn	nons unexecuted because		; or		
	☐ Other (<i>specify</i>):					
	My fees are \$	for travel and \$	for services, for a total of \$	0.00		
	I declare under penalty of perjury that this information is true.					
Date:						
Dute.			Server's signature			
			Printed name and title			
			Server's address			

Additional information regarding attempted service, etc: